BEST AVAILABLE COPY

	PATENT A	RD	Application or Docket Number 09/836, 475 35. C15298											
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			16				ſ	RATE	Ē	FEE] [RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 355.00		355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/6 minus 20=		. Ø			X\$ 9=			OR	X\$18=	_	
INDEPENDENT CLAIMS			# minus 3 =		•			X40=			OR	X80=	80	
MU	LTIPLE DEPENI	RESENT					+135=			OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	ı	TOTA		1	OR	TOTAL	790	
CLAIMS AS AMENDED - PART II									1		OTHER	THAN		
	(Column 1) (Column 2) (Column 3							SMAL	LLE	NTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOW	Total	.15	Minus	•• &	0	=		X\$ 9	=		OR	X\$18=		
AME	Independent	• 3	Minus	***	4	=		X40=	- 1		OR	X80=		
ا	FIRST PRESE	NTATION OF ME	JLTIPLE DEF	PENDEN	T CLAIM]	+135	=		OR	+270=		
0								TO	TAL			TOTAL	A	
	(O)/O/O (Column 1) (Column 2) (Column 3)								EE			ADDIT. FEE	سليك	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY DFOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.15	Minus	Q	0	=] [X\$ 9)=		OR	X\$18=	1	
	Independent	· 3	Minus	***	4	=]	X40:	=		OR	XB6€		
ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	TCLAIM		ן נ	+135			OR	290	/	
								- 10	TAL		OR	TOTAL	D	
		(Column 1)		(Colu	ımn 2)	(Column 3)		ADDIT. F	EE	<u></u>	J ~	ADDIT. FEE	-	
		CLAIMS		HIG	HEST		וו			ADDI-	1		ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATI	Ε	TIONAL		RATE	TIONAL FEE	
	Total	*	Minus	••		=	11	X\$ 9	_	T Residen	OR	X\$18≃	,	
MEN	Independent		Minus	•••		=		X40:	-		1	X80=		
4	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM]		_		OR		 	
					4 - #A" '		_	+135			OR	+270=		
	" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													